## BEST AVAILABLE COPY

CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY TYPE		OTHER TH			
TOTAL CLAIMS	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1					RATE	FEE	7	RATE	F
FOR		NUMBER FI	ILED	NUMBER EX	XTRA	BASIC FEE	355.00		BASIC FEE	
TOTAL CHARGEABLE C	LAIMS	16 minu	us 20= *			X\$ 9=	:	OR	X\$18=	
INDEPENDENT CLAIMS	7	min	nus 3 = *	*		X40=		OR	X80=	ية مي
MULTIPLE DEPENDENT	CLAIM PRE	SENT	Maria Cara			+135=		OR	+270=	
If the difference in colu	umn 1 is les	s than zer	ro, enter "C	0" in colum	nn 2	TOTAL	-	OR		81
CLAIM	S AS AM	ENDED	- PART	П		TOTAL	- 20 s		OTHER	
(Col	umn 1)		(Column	(Col	<u>lumn 3)</u>	SMALL	ENTITY	OR	SMALL	**
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Total Independent	M	inus	***	<u>पूका</u> = 5 . कि. चि.	XXX	X40=			X80=	
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